	AUG 18 20	304 10:41 FR BAY	ÆR CHEMICA	ALS LAW	412	777 2612 TO	917037464000	P.02/02	
	IPE	حبر	¬∖ PART	B- FEE	'S) TR /	NSMITTAL	, مس ر		
AUG	Complete and send	this form, together w	ith applicable	fee(s), to:	Mail r Fax	Mail Stop ISSU Commissioner: P.O. Box 1450 Alexandria, Viz (703) 746-4000	for Patents ginia 22313-1450	4 should be completed when	
8									
	00157 BAYER POLYN 100 BAYER ROA PITTSBURGH, P.	7590 05/25/2004 MERS LLC AD A 15205	up with any corrections	or use Block 1)		Note: A certificate of Fee(s) Transmittal. T papers. Bach addition have its own certificate.	of mailing can only be used his certificate cannot be used all paper, such as an assign the of mailing or transmission pertificate of Mailing or Transmission	d for domestic mailings of the ed for any other accompanyin iment or formal drawing, mu in.	
	LWONDIM2 00000173 5	02527 09831097		•		· / ·	ich-Req. No.5		
· · · · · · · · · · · · · · · · · · ·	1330.00 DA							(Signature)	
	APPLICATION NO. FILING DATE			Dr. o.				JD (Date)	
	09/831,097	95/03/2001			ED INVEN	ITOR	ATTORNEY DOCKET NO	. CONFIRMATION NO.	
	OFF651,097 US/03/2001 Michael Zobel M0-6332/LEA TITLE OF INVENTION: THERMOPLASTIC RESINS WITH A LOW PROPORTION OF COARSE PARTICLES							8436	
	The owner of Coarse Particles								
	APPLN, TYPE	SMALL ENTITY	ISSUE F	BE .	Pt	BLICATION FEE	TOTAL FEE(\$) DUE	DATE DUE	
	nonprovisional	nonprovisional NO S		1330		\$0	\$1330	08/25/2004	
	EXAMINER		ART UNIT		CI	ASS-SUBCLASS	}		
	ASINOVSKY, OLGA 17			1 525-316000					
	I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Jill Denesyich Reg. No. 52.810 Godfried R. Akorli Reg. No. 28.779					
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
	PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the potent. Inclusion of assignce data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
	Bayer Aktiengesellschaft D-51368 Leverkusen, Germany								
	Please check the appropriate assignee category or categories (will not be printed on the patent); 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):								
	12 Issue Fee			_		unt of the fee(s) is encl	osed.		
č	D Publication Fee			☐ Payment by credit card. Form PTO-2038 is anached.					
	☐ Advance Order - # of Copies 25				The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2527 (enclose an extra copy of this form).				
	Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.								
	(Authorized Signature) (Date) All Police Vich. Rec. No 52,810 8/18/04 NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.								
	Ints collection of information of the collection of the papplication. Confidentiality is completed application form case. Any comments on suggestions for reducing this Patent and Tredemark Of 12313-1450. DO NOT SER	on is required by 37 CFR 1 yr the public which is to file is governed by 35 U.S.C. 122 is to complete, including gas to the USPTO, Time will the amount of time you rest burden, should be sent to fice, U.S. Department of the Polymer of Patents, Alexandria, Virgin or Patents, Alexandria, Virgin or Patents, Alexandria, Virgin	311. The information (and by the USP 2 and 37 CFR 1.14 tering, preparing, a vary depending upuire to complete the Chief Information Commerce, Alego FORMS TO 1 a 22313-1450.	Office. tion is required to process. This collection and submitting the indivities form a stion Officer, sondria, Vir IMIS ADDR	red to ss) an tion is ag the vidual und/or U.S. rginia t.ESS.				

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033 U.S. Patent and Trodemark Office; U.S. DEPARTMENT OF COMMERCE





Fax Coversheet

Date:

August 18, 2004

To:

ISSUE FEE

Company:

USPTO

Fax:

703-746-4000

Fax:

412-777-2612

Number of pages (including this page) 2

Jill Denesvich

Phone:

Phone:

From:

Div/Dept.:

412-777-2268

Patent Department

ATTORNEY DOCKET: Mo6332/LeA 33,062

APPLICATION OF: Michael Zobel

GROUP NO.: 1711

SERIAL NUMBER: 09/831,097

FILED: May 3, 2001

Please find a copy of an ISSUE FEE TRANSMITTAL AND FEE of \$ 1330.00.

If you have any questions please call.

S:\Chem Pittsburgh\Law Shared\SHARED\JD\PATENTS\6332\6332 Fax-ISSUE FEE.doc

NOTICE OF CONFIDENTIALITY

The information contained in and transmitted with this facsimile may be confidential, subject to the attorney-client privilege, attorney work product, and/or exempt from disclosure under applicable law and is intended only for the individual or entity named above. If you are not the intended recipient, you are hereby notified that inadvertent disclosure of this information to you does not constitute a waiver of confidentiality or privilege and that any review, disclosure, copying, or use of the contents of the facsimile by you is prohibited. If you have received this facsimile in error, please immediately call the sender collect at the above phone number, so that we can arrange for the return of the original facsimile at our cost.